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APPLICANTS

John David Melius, Waldorf, MD;

** CONTINUING DATA ***** 83 11-f04
 This application claims benefit of 60/265518 02/02/2001

** FOREIGN APPLICATIONS ***** 90 11-1-04

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	MD	7	20	3
Verified and Acknowledged Examiner's Signature <u>90 11-1-04</u> Initials				

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TITLE
 Ergonomic swim fin apparatus

FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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